

63% of oncologists, only 2/3 of them 39% were ready to practice it; 47 % of them cannot see themselves doing and other 14% are unsure.

Conclusion: Although euthanasia is the cause of many disputes in the medical community and also society, it seems that in our country the majority of oncologists have a vision pro euthanasia. In our opinion, this attitude could be explained by the specific of the oncological assistance – the permanent contact with patients that suffer from mostly incurable diseases.

Key words: euthanasia, oncologists.

369. THE IMPACT OF TEEN BIRTHS ON MOTHER'S AND CHILD'S HEALTH

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Introduction: Globally, the number of teenage pregnancy is increasing in consequence of social changes and sexual liberty. Moldova faces a difficult situation, just like other countries, related to the lack of sexual education, early onset of sexual life, unprotected sex. In these circumstances are outlined major problems – teen pregnancy and its complications. Adolescence affects newborn's and mother's health, increasing infant morbidity and mortality as well as morbidity and mortality of mothers. Most authors show that teenage pregnancy brings an increased risk of preeclampsia, premature birth, neonatal hypotrophy, advanced degrees anemia, etc.

Materials and methods: The aim of this study was to evaluate maternal and neonatal complications Associated with teenage mothers. In the study were included 112 teenage-mothers. With the analysing of medical documentation from the Institute of Mother and Child Care(Chisinau, Moldova). Socioeconomic data, age, number of pregnancies, antenatal care and complications, neonatal situation were considered.

Discussion results:. The results of the study can be grouped in two subdivisions: the social aspects and the medical aspects of teen-births. The social aspects: The Distribution of births by the mother's biological age is not very cleared shaped, the studied age varied from 13 to 19 years. Distribution of interviewers by area of residence. In 84 % teenage-mothers were from rural places. The Civil status of interviewers: in 40 % of the 112 pregnant woman were not married. In this case we can

The debut was more at the age of 16 (52%) and 18 (25%). At the topic „Adolescents' information sources about sexual life” i can conclude that medical personal, brochures, parents cannot make a good imagine to attract teenagers to talk about sexuality. Adolescents have more confidence in friends or media(35% and 20%). Also the Topic” The level of knowledge about contraception methods” is not clear, in only 46% they said that they know methods of contraception, but didn't use them. Unknowingness at the topic „The level of knowledge about unprotected sex risks” was at 63 %. The direction of confidence of pregnant-adolescent is very clear determinated and oriented to child's father (65%). At the second place is a medical personnel (22%). The Acceptance degree of the New-Born is 90% positive, this represents a low degree

of abandonment. In 100 % was a positive answer at the questions the „Necessity of “Sexual education” courses”.

The medical aspects: In 77 % the birth was at normal period. And in 62% was per vias naturalis. On the other hand, there were found many complications. Iron deficiency anemia in 96 %, STDs / genitourinary tract infections in 38%, Failure of contraction forces in 46 %, etc. Approximately 90% of the adolescents that gave birth per vias naturalis had birth canal laceration at different levels. Also some new-born complications were found. They are Neonatal jaundice (63%), Child affected by the umbilical cord circulation (42%), Child affected by caesarean section (38%), etc.

Conclusion: Analyzing study data, I concluded that young age brings with it some risks during birth. Literature data also warns us about the risks, which will be reflected both newborn`s health as well as his mother. Teenage-mothers had a low level of education, also were not informed about contraception methods, and some of them cannot provide with all necessities for life or existence.

Key words: pregnancy, teenage, new-borns, complications

370. KINETOTERAPEUTICAL REHABILITATION:MEDICAL, SOCIAL AND BIOETHICAL ASPECTS

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The concept of medical ethics occurred with the development of medical act and medical science to help the main character of health system-the patient. The basic principles of bioethics focused on beneficence and on patient autonomy are complementary with medical rehabilitation specialization, converging to the same destination: patient independence. Over the last decade both disciplines have benefit from expansion and development, but most often not converged, being raised ethical and moral judgment related to behaviour and conduct of medical staff and reported in the scientific and academic therapists activity.

This work wants to raise awareness of physical therapists and medical specialists in recovering, providing data on the evolution of these disciplines. Medical ethics is the discipline that puts above all integrity, autonomy, physical and mental health of the patient. And the rehabilitation can not be achieved without being primarily a professional with knowledge and without ethical, moral judgment and no ability of choice and selection of the best decisions for the benefit of the patient. The therapist and the patient work together, if this process fails, it will not fully recover medical act. There is the issue of liability patient rehabilitation process. The most important skill is communication appreciated by patients, therapists focus on the patient followed by itself and not just the present condition. This confirms the need to develop a different kind of professional relationship between patient and therapist, precisely because the primary goal of rehabilitation - autonomy and because of time spent with the patient physical therapist. The moral judgment in ethical decision making include the ability to have vision on both sides described above to make connections between theory and practice ethics and recognize the importance